



State of Washington  
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use

Fee Paid 1000

Date 1-4-96

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Green Mountain Resort, Inc. Home Tel: ( ) -  
Mailing Address P.O. Box 1370 Work Tel: (360) 693 - 5200  
City Vancouver State WA Zip+4 98660 + 1370 FAX: (503) 254 - 6217

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above

Name Home Tel: ( ) -  
Mailing Address Work Tel: ( ) -  
City State Zip+4 + FAX: ( ) -  
Relationship to applicant

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 325 ( ☒ gallons per minute or  
☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the  
purpose(s) of obtaining approval for drilling a testing well. ATTACH A "LEGAL"  
DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is  
not sufficient. irrigation (golf course) - irrigation season  
Estimate a maximum annual quantity to be used in acre-feet per year: N/A

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be  
needed:  
From     /     /     to     /     /    

Section 4. WATER SOURCE

If SURFACE WATER						If GROUNDWATER		
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:						A permit is desired for <u>1</u> well(s). Two different locations have been mapped. The location will be determined if water is provided from either/or one of the two locations.		
Number of diversions: <u>          </u>								
Source flows into (name of body of water):						Size & depth of well(s): (approximately) <u>8 ft. width / 500-1000 ft depth</u>		
LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: 1st choice: <u>1950 ft. north and 3 ft. east of SW corner,</u> Section 21, T2N, R3E. 2nd choice: <u>590 ft. south and 280 ft. east of NW corner, Section 21, T2n, R3E</u>								
¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
1st choice	SW	21	T2N	R3E	Clark			
2nd choice	NW	21	T2N	R3E	Clark			
For Ecology Use Date Received: <u>1/4/96</u> Priority Date: <u>1/4/96</u>								
SEPA: <u>Exempt</u> /Not Exempt FERC License # <u>          </u> Dept. Of Health # <u>          </u>								
Date Accepted As Complete <u>1/11/96</u> By <u>SC</u> Date Returned <u>          </u> By <u>          </u> WRIA: <u>28</u>								

## Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: "Installation of testing well"
- B. Briefly describe your proposed water system. (See instructions.)  
Drilling of a well to test for the probability of a water supply for a future project.  
The possibility of water not being provided from the first location has been taken into consideration and therefore a second location has also been determined.
- C. Do you already have any water rights or claims associated with this property or system? ☒ YES ☐ NO  
PROVIDE DOCUMENTATION. SEE ATTACHED DOCUMENTATION

## Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: None Type of connection (Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☒ YES ☐ NO  
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.  
No connections are requested.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

## Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- ~~Not applicable.~~
- A. Total number of acres to be irrigated: 120
- B. List total number of acres for other specified agricultural uses:
- |           |             |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: 120
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)  
Add up the acreage in which you have a controlling interest, including only:  
‡ Acreage irrigated under water rights acquired after December 8, 1977;  
‡ Acreage proposed to be irrigated under this application;  
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☒ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO  
If yes, enter permit no: \_\_\_\_\_
- E. Farm uses:  
Stockwater - Total # of animals \_\_\_\_\_ Animal type \_\_\_\_\_ (If dairy cattle, see below)  
Dairy - # Milking \_\_\_\_\_ # Non-milking \_\_\_\_\_



## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? Not applicable. ☐ YES ☐ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site. The most direct route from I-205 is eastbound on Fourth Plain to 199th. Turn southbound (right). The road turns into NE Ingle and the site is on the left hand side. The address is 2817 2817 NE Ingle Road, Vancouver, WA 98682-9079. There are farm buildings located on the site. \*Please call and inform us when a site visit may be planned so that we may coordinate your visit with the site manager, otherwise all vehicular access may be denied at entrance points

\*\*SEE MAP ATTACHED\*\*SEE MAP ATTACHED\*\*

## Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

## Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used? ☒ YES ☐ NO  
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):


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B. Does the applicant own the land on which the water source is located? ☒ YES ☐ NO  
If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

  
Applicant (or authorized representative)

1/2/96  
Date

Landowner for place of use (if same as applicant, write "same")

Date

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff \_\_\_\_\_ Date \_\_\_\_\_

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).